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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | | | |
|---|---|----------------------------|----|-------|-------------------|---|--------------|----|--|---------|--|
| | Moulton, Seth, , , | | | | | | | | | | |
| | (b) Address (number and street) PO Box 2013 | ☐ Check if address changed | | | | Candidate's FEC Identification Number P00011866 | | | | | |
| | (c) City, State, and ZIP Code | City, State, and ZIP Code | | | | | New | | | Amended | |
| | Salem | MA 01970 | | | | Statement | x (N) | OR | | (A) | |
| 4. | Party Affiliation | 5. Office Sough | nt | | 6. State & Dist | rict of Candidate | | | | | |
| | DEMOCRATIC PARTY | Presidentia | al | | | 00 | | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election) | | | | | | | | | | |
| | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | | | |
| (a) Name of Committee (in full) SETH MOULTON FOR AMERICA, INC. | | | | | | | | | | | |
| | (b) Address (number and street) PO BOX 2013 | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | |
| | SALEM | | | | MA | 01970 | | | | | |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | | | | | | | | | | | |
| 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. | | | | | | | | | | | |
| NOTE: This designation should be filed with the principal campaign committee. | | | | | | | | | | | |
| (a) Name of Committee (in full) MOULTON LEADERSHIP FUND | | | | | | | | | | | |
| | (b) Address (number and street) PO BOX 2013 | | | | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | | | | | |
| | SALEM | | | | MA | 01970 | | | | | |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. | | | | | | | | | | | |
| Si | gnature of Candidate | | | | | Date | | | | | |
| M | oulton, Seth, , , | | | [Elec | tronically Filed] | 05/07/2019 | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g. | | | | | | | | | | | |
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FEC FORM 2 (REV. 02/2009)